

FIG. 1

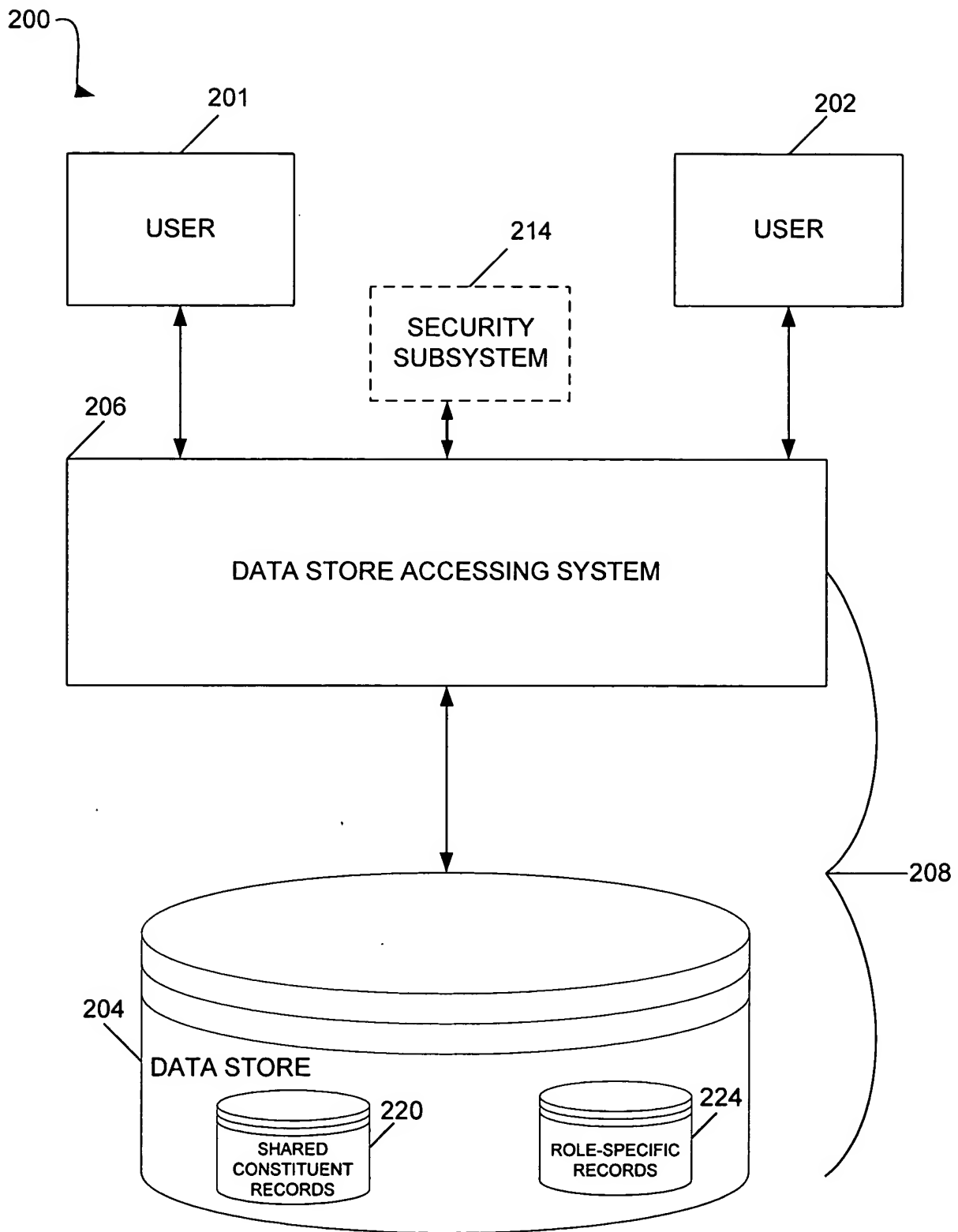


FIG. 2

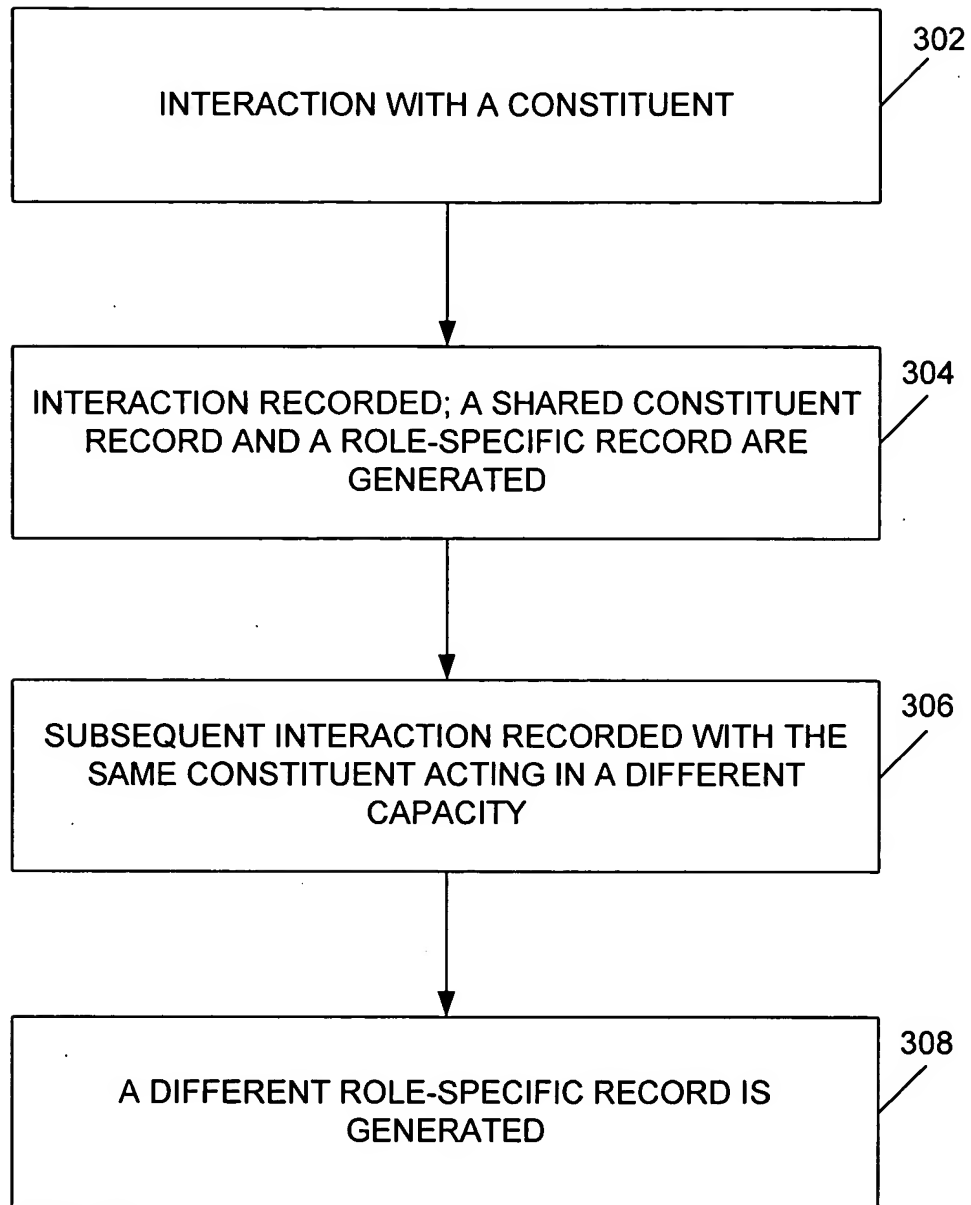


FIG. 3

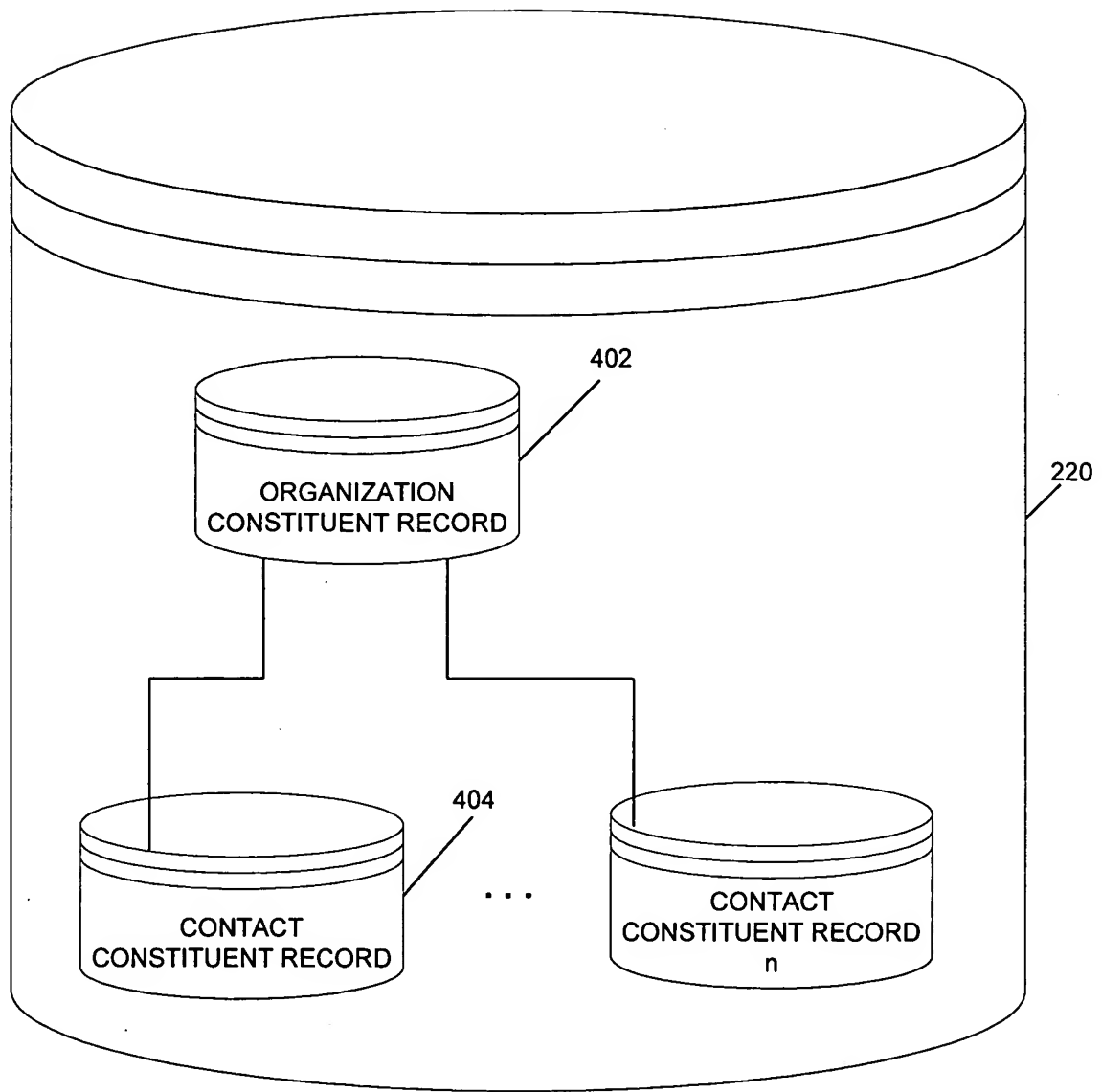


FIG. 4

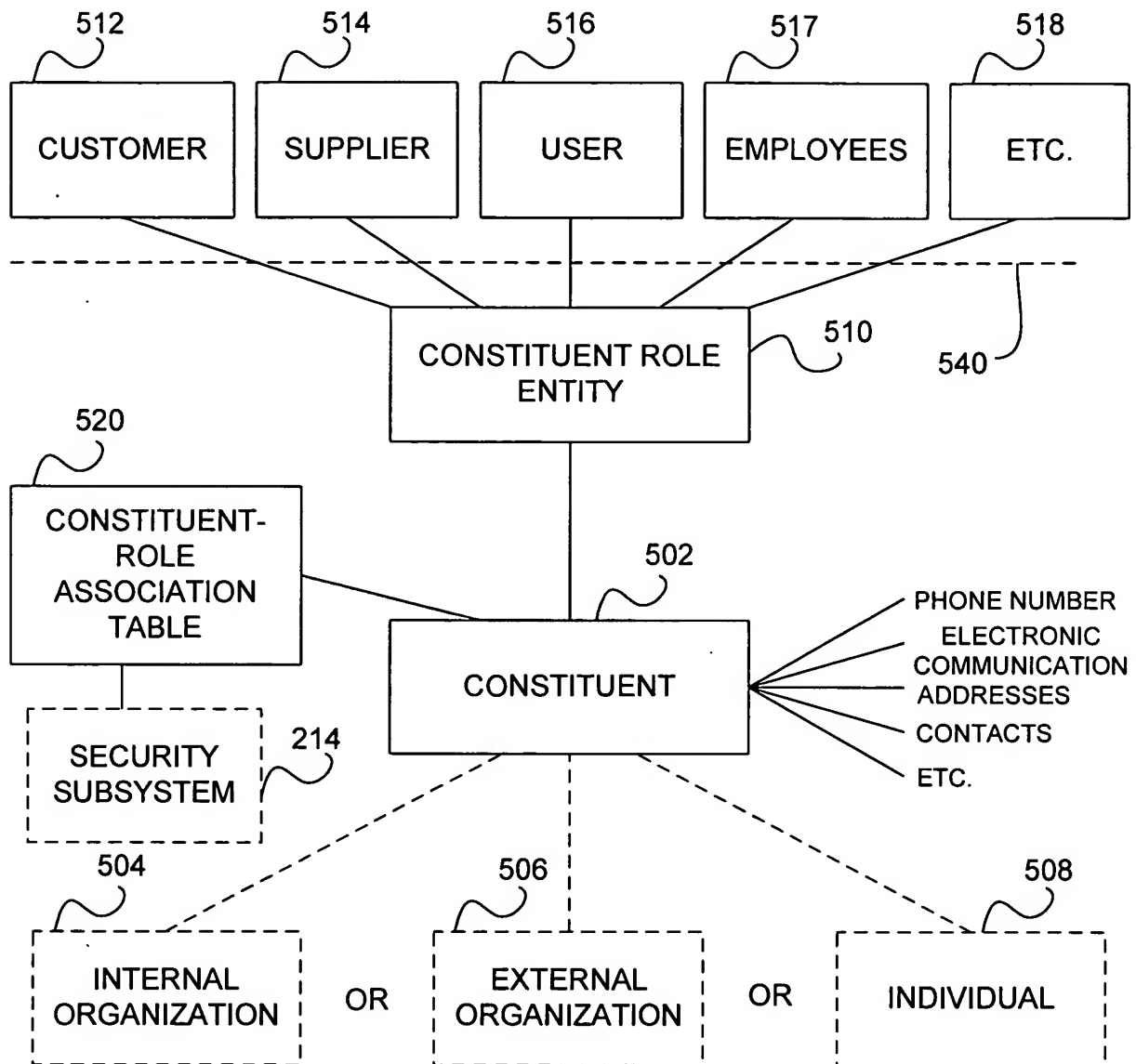


FIG. 5

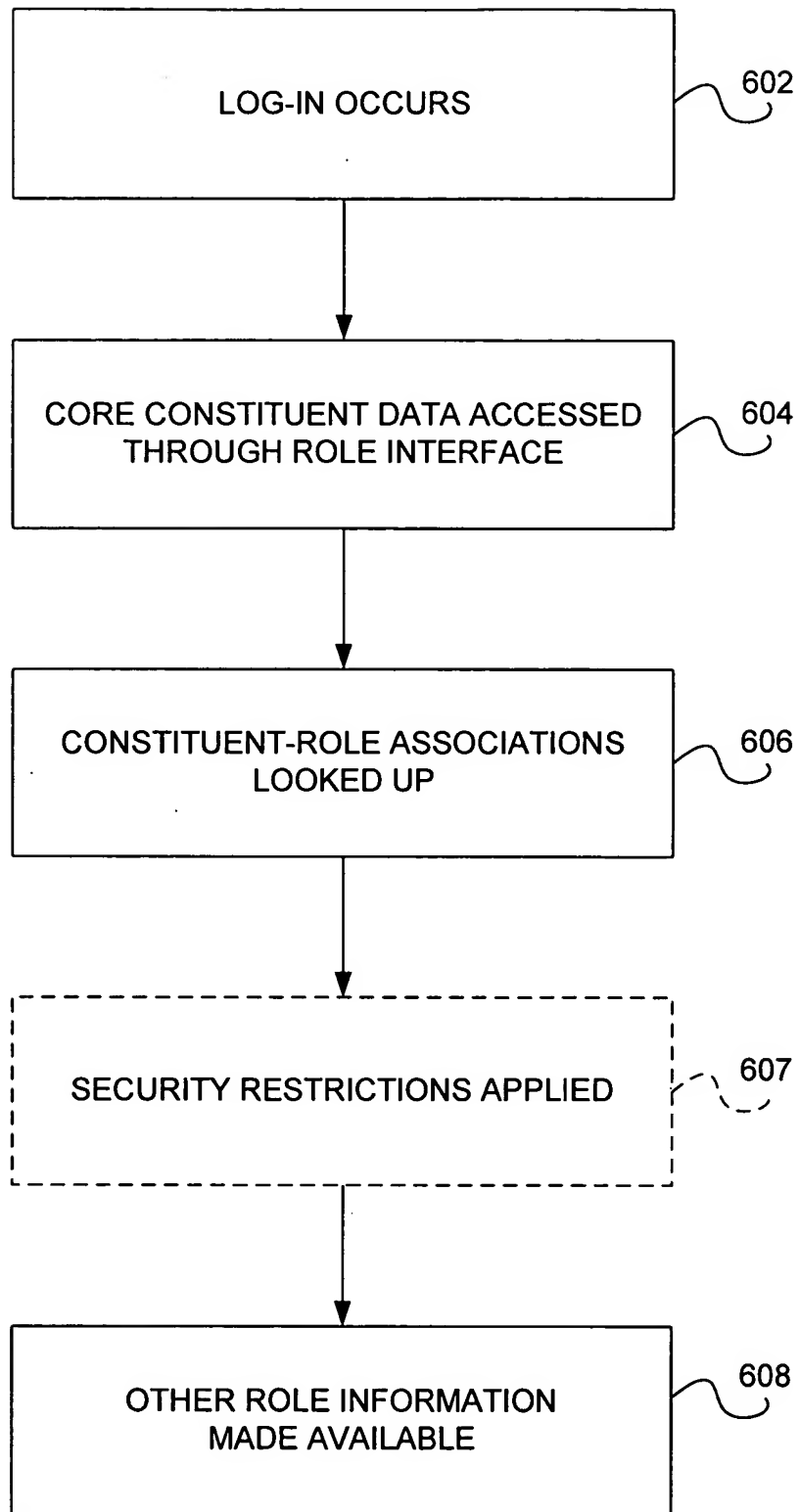


FIG. 6

ENTERPRISE ORGANIZATION STRUCTURE

FILE

EDIT

VIEW

FAVORITES

TOOLS

ACTIONS

HELP

NEW

SEND TO

702

704

SA

DMS HEALTH GROUP

710

708

712

716

706

COMPANIES

ID SETUP

ORGANIZATION STRUCTURE

USERS

ROLES

CALENDARS

ORGANIZATION STRUCTURE

ENTERPRISE ORGANIZATION STRUCTURE

710

708

712

716

706

ORGANIZATION STRUCTURE

MANUFACTURING CI

R&D CI

SALES CI

SUPPORT CI

DMS HEALTH TECHNOLOGIES

MANUFACTURING HT

R&D HT

SALES HT

SUPPORT HT

DMS IMAGING

FINANCING SERVICES IMAGING

R&D IMAGING

SALES IMAGING

SALES MANUFACTURING

SUPPORT IMAGING

DMS INTERIM SOLUTIONS

FINANCING SERVICES ID

R&D IS

SALES IS

SUPPORT IS

DMS MANILA MANUFACTURING

MANUFACTURING MM

R&D MM

SALES MM

DMS MEDSOURCE PARTNERS

SALES MP

SUPPORT MP

DMS NUCLEAR IMAGING

FINANCIAL SERVICES NI

MANUFACTURING NI

R&D NI

SALES N

SUPPORT NI

DMS PORTABLE X-RAY

FINANCING SERVICES PX-R

MANUFACTURING PX-R

R&D PX-R

SALES PX-R

SUPPORT PX-R

714

716

706

ORGANIZATION STRUCTURE SETUP

BUSINESS UNIT

DMS HEALTH GROUP

COMPANY

MARK ALL

UNMARK ALL

CUSTOMERS

VENDORS

EMPLOYEES

ITEMS

ACCOUNTS

ADVANCED RADIOLOGY

ARCADIA COMMUNITY HOSPITAL

BELLEVUE HEALTH SPECIALISTS

BLOOMINGTON CENTRAL HOSPITAL

CAVALIER COUNTY MEMORIAL HOSP

ENGLEHART HEALTH PARTNERS

FLAGSTAFF COUNTY GENERAL

GROUP RADIOLOGY SPECIALISTS

INTERNAL MEDICINE ASSOCIATES

RED RIVER

RIVER FALLS MEDICAL CLINIC

SOUTHERN INDIANA RADIOLOGY

WESTERN RADIOLOGY

ZIMMERMAN CLINIC

START

8:04PM

FIG. 7

| <b>VENDOR MAINTENANCE</b>  |  |  |  |
|--|--|--|--|
| FILE   EDIT   VIEW   FAVORITES   TOOLS   ACTIONS   HELP  | <input type="checkbox"/> NEW <input type="checkbox"/> SEND TO <input type="checkbox"/> X   |  |  |
| <input type="checkbox"/> INVOICES<br><input checked="" type="checkbox"/> VENDORS   | <div style="float: right; border: 1px solid black; padding: 2px; margin-bottom: 5px;">DMS HEALTH GROUP</div> <div style="clear: both;"></div>          |  |  |
| VENDORS  | GENERAL  | ACTIVITIES   | ALL FIELDS   |
| <p><b>VENDOR NAME</b></p> <p>AMERICAN EAGLE<br/>AMERICAN EXPRESS<br/>AMERITRADE<br/>MI HEALTH GROUP/DMS IMAGING<br/>PHILLIPS PETROLEUM<br/>PHILLIPS MEDICAL SYSTEMS<br/>PORTLAND MEDICAL CENTER<br/>SOUTHERN INDIANA RADIOLOGY<br/>BLOOMINGTON<br/>CAVALIER COUNTY<br/>ARCADIA HOSPITAL<br/>ARCADIA COMMUNITY HOSPITAL</p> | <p><b>VENDOR ID</b></p> <p>AMEREAG<br/>AMEREXPR<br/>AMRTRD<br/>MIHGDMS<br/>PHPT<br/>PMSYS<br/>PTMC<br/>SIOR<br/>VENDOR01<br/>VENDOR02<br/>VENDOR03</p> | <p><b>VENDOR NAME</b></p> <p>ARCADIA COMMUNITY HOSPITAL</p> <p><b>ALIAS</b></p> <p>ARCADIA</p> <p><b>ORG NAME</b></p> <p>ARCADIA COMMUNITY HOSPITAL</p>  | <p><b>ROLES</b></p> <p>VENDOR07</p> <p>ARCADIA COMMUNITY HOSPITAL</p> <p>ARCADIA</p> <p>ARCADIA COMMUNITY HOSPITAL</p> |
| <p><b>ASSOCIATIONS</b></p> <p>1002 →</p>   |  | <p>1004 →</p>  |  |
| <p><b>ROLE</b></p> <p>CUSTOMER<br/>CUSTOMER<br/>CUSTOMER<br/>VENDOR<br/>VENDOR<br/>VENDOR</p>  |  | <p><b>COMPANY</b></p> <p>DMS INTERIM SOLUTIONS]</p> <p>DMS MANILA MANUFACTURING</p> <p>DMS PORTABLE X-RAY</p> <p>DMS MEDSOURCE PARTNERS</p> <p>DMS NUCLEAR IMAGING</p> <p>DMS PORTABLE X-RAY</p> <p>DMS COMPUTED IMAGING</p> |  |
| <p><b>ID</b></p> <p>ACTH<br/>ACTH<br/>ACTH<br/>VENDOR07<br/>VENDOR07<br/>VENDOR07</p>  |  |  |  |

FIG. 10



[illegible]

**FIG. 9**

**CUSTOMER MAINTENANCE**

FILE EDIT VIEW FAVORITES TOOLS ACTIONS HELP

☐ NEW

☐ INVOICES

☒ CUSTOMERS

☐ PERSON

☒ EXTERNAL ORGANIZATION

702 SA

704 DMS HEALTH GROUP

810

CUSTOMER ID 1-20030220-000

ACTH

ADRD

BCH

BLHS

CCMH

ENHP

FLCG

FRSP

IMA

RFMC

SIRA

WERD

ZIMC

806

SHORT NAME

RED RIVER

ARCADIA COMMUNITY HOSPITAL

ADVANCED RADIOLOGY

BLOOMINGTON CENTRAL HOSPITAL

BELLEVUE HEALTH SPECIALISTS

CAVALIER COUNTY MEMORIAL HOSP

ENGLEHART HEALTH PARTNERS

FLAGSTAFF COUNTY GENERAL

GROUP RADIOLOGY SPECIALISTS

INTERNAL MEDICINE ASSOCIATES

RIVER FALLS MEDICAL CLINIC

SOUTHERN INDIANA RADIOLOGY

WESTERN RADIOLOGY

ZIMMERMAN CLINIC

808

804

802

☐ GENERAL

☒ ROLES

☐ ACTIVITIES

☐ MULTICURRENCY

☐ SALES

☐ FINANCIAL

☐ CREDIT

☐ BANKING

CUSTOMER ID

ALIAS

ORG NAME

LEGAL NAME

PRIMARY LANGUAGE

CUSTOMER TYPE

SHORT NAME

PHONE NUMBER

PRIMARY...

ADDRESS

ADDRESS..

EMAIL

WEBPAGE

IM ADDR

YR EST

EMPLOYEES

CUSTOMERS

VENDORS

BANKING

ACCOUNTS

REPORTS

CALENDARS

SETUP

START

8:29pm

**FIG. 8**